



STATE OF IOWA

CHESTER J. CULVER, GOVERNOR
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
EUGENE I. GESSOW, DIRECTOR

March 6, 2009

GENERAL LETTER NO. 5-A-13

ISSUED BY: Bureau of Medical Supports,
Division of Financial, Health and Work Supports

SUBJECT: Employees' Manual, Title 5, Chapter A, *INTERIM ASSISTANCE*
REIMBURSEMENT, pages 4, 5, and 6, revised.

Summary

This chapter is revised to update the Department's administrative procedures for interim assistance reimbursement.

Effective Date

Upon receipt.

Material Superseded

Remove the following pages from Employees' Manual, Title 5, Chapter A, and destroy them:

<u>Page</u>	<u>Date</u>
4, 5, 6	March 1, 2004

Additional Information

Refer questions about this general letter to your area income maintenance administrator.

ADMINISTRATIVE REQUIREMENTS

The Department of Human Services has entered into an agreement with the federal Social Security Administration (SSA) under which the Department coordinates and monitors activities of county agencies in administration of interim assistance reimbursement. The Department acts as liaison with the SSA Regional Office in Kansas City in matters of policy and also assists in resolution of any disputes arising between SSA and county agencies.

Direct any questions or problems relating to individual authorizations, retroactive payments, non-receipt of SSA reports, and status of individual cases to the SSA district office. The SSA district office also contacts the county agency directly with any problems.

Direct any questions about policy information in this chapter to the interim assistance reimbursement (IAR) program manager in the Division of Financial, Health and Work Supports.

The following sections address:

- ◆ [How counties apply for the program](#)
- ◆ [Certification of authority for the county](#)
- ◆ [Maintenance and confidentiality of interim assistance records](#)
- ◆ [Appeal procedures of reimbursement decisions](#)
- ◆ [Recovery of overpayments](#)

How Counties Apply to Participate in the Program

Legal reference: 441 IAC 57.2(249), 20 CFR 416.1910

A county agency that wishes to participate in the interim assistance reimbursement program should first contact the IAR program manager to indicate a desire to participate. The county agency must enter into an agreement with the Department. For purpose of the agreement, the administrator of the Division of Financial, Health and Work Supports acts as the designee for the Department's director.

The IAR program manager shall:

- ◆ Complete a *Pre-Contract Questionnaire*, form 470-0022.
- ◆ Secure a contract number.
- ◆ Prepare the agreement with the county agency using form 470-1948, *Interim Assistance Reimbursement Agreement*, for agreements between the state and the county general assistance agency, central point of coordination, or veteran affairs office.
- ◆ Send two copies of the agreement to the county agency for signature.

The county agency shall:

- ◆ Sign both copies of the agreement.
 - The chair of the county board of supervisors must sign the agreement for the county general assistance agency or for the central point of coordination.
 - The chair of the county commission of veteran affairs must sign the agreement for the county commission of veteran affairs.
- ◆ Return the signed copies to the administrator of the Division of Financial, Health and Work Supports for signature.

The administrator shall:

- ◆ Sign the agreement on behalf of the Department.
- ◆ Send one original copy of the agreement back to the county agency.
- ◆ Keep the other original copy in the Department file for that county.

Certification of Authority

Legal reference: 441 IAC 57.7(249A)

The county agency must submit form 470-1947, *Certificate of Authority: Interim Assistance Reimbursement (IRA)*, to:

- ◆ The Social Security Administration Regional Office, and
- ◆ The IAR program manager.

This form designates officials of the county agency authorized to sign form SSA-8125, *Notice of Interim Assistance Reimbursement*. The Social Security Administration will not process form SSA-8125 when signed by a person whose signature, name, and title are not on file with the SSA Regional Office on form 470-1947.

Form 470-1947 must be submitted:

- ◆ Before the county agency receives its first interim assistance reimbursement payment.
- ◆ When any change in authorized officials occurs.

To ensure that interim assistance checks will be mailed to the right address, county agencies should report changes of address immediately to the Social Security Administration by writing to:

Social Security Administration
IAR Coordinator
Room 1073, Federal Office Building
601 E. 12th Street
Kansas City, MO 64106

DO NOT OPEN IN THE MAILROOM

In reporting changes of address, always provide the full name of the agency. The county agency should also notify the IAR program manager to update the Department mailing list.

Maintenance and Confidentiality of Records

Legal reference: 441 IAC 57.2(5)

The requirements for maintenance of records and confidentiality are explained in Section 8 of form 470-1948, *Interim Assistance Reimbursement Agreement*.